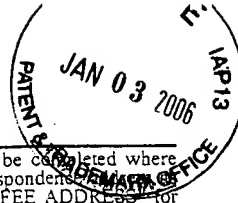


and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE F
Commissioner for Patents
P.O. Box 1450
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10/03/2005

ROBERT E. BUSHNELL
1522 K STREET NW
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WASHINGTON, DC 20005-1202

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Please correct:

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/890,154	10/23/2001	Louis Lagler	PS6359PCT	7578

TITLE OF INVENTION: CLOSED ~~ENTRUE~~ CLOSURE PROVIDING MATING UPPER AND LOWER INJECTION MOULDED PARTS COUPLED BY INTEGRALLY FORMED HINGE CONNECTION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	01/03/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
HYLTON, ROBIN ANNETTE	3727	220-259000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Robert E. Bushnell, Esq.

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

CREANOVA AG

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Baar, SWITZERLAND

01/04/2006 MBEYENE2 00000173 09890154

01 FC:1501

1400.00 DP

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date 3 January 2006

Typed or printed name

Robert E. Bushnell, Esq.

Registration No. 27,774

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Louis Lagler et al.

Serial No.: 09/890,154

Filed: 23 October 2001

For: CLOSED INJECTION MOULDED CLOSURE PROVIDING MATING UPPER
AND LOWER PARTS COUPLED BY INTEGRALLY FORMED HINGE
CONNECTIONS



Examiner: *HYLTON, ROBIN ANNETTE*

Art Unit: 3727

ISSUE FEE TRANSMITTAL

Mail Stop: ISSUE FEE

Commissioner for Patents

Alexandria, VA 22313-1450

Sir:


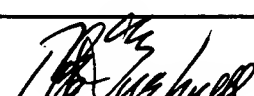
This transmittal accompanies a signed Issue Fee Transmittal, PTOL-85B, and Applicant's check drawn to the order of the Commissioner of Patents & Trademarks in the amount of U.S. \$1,400.00.

Respectfully submitted,

Robert E. Bushnell
Attorney for Applicant
Reg. No.: 27,774

1522 K Street, N.W. Suite 300
Washington, D.C. 20005-1202
(202) 408-9040

Folio: P56559PCT
Date: January 3, 2006
REB/hp

0002/PTO U.S. Department of Commerce Patent and Trademark Office		COMPLETE IF KNOWN																									
 <p>FEE TRANSMITTAL</p>		Application Number	09/890,154																								
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TOTAL AMOUNT OF PAYMENT	\$1,400.00	Attorney Docket Number	P56559PCT																								
METHOD OF PAYMENT (check one)																											
1. <input checked="" type="checkbox"/> Payment enclosed: <input checked="" type="checkbox"/> Check # 50163 <input type="checkbox"/> Money order <input type="checkbox"/> Other		2. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Account Number: <u>02-4943</u> Deposit Account Name: <input type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the issue Fee set in 37 CFR 1.18 at the mailing of the Notice of Allowance. 37 CFR 1.311 (b).																									
FEE CALCULATION																											
ISSUE FEE PUBLICATION FEE <table border="0"> <thead> <tr> <th>Fee Code</th> <th>Fee(s)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1501</td> <td>\$ 1,400.00</td> <td>Utility Issue fee</td> <td>\$ 1,400.00</td> </tr> <tr> <td>2501</td> <td>\$ 700.00</td> <td>Utility Issue fee</td> <td>0.00</td> </tr> <tr> <td colspan="4"> </td> </tr> <tr> <td>1504</td> <td>\$300.00</td> <td>Publication fee</td> <td>\$0.00</td> </tr> <tr> <td colspan="3" style="text-align: right;">TOTAL:</td> <td>\$1,400.00</td> </tr> </tbody> </table>				Fee Code	Fee(s)	Fee Description	Fee Paid	1501	\$ 1,400.00	Utility Issue fee	\$ 1,400.00	2501	\$ 700.00	Utility Issue fee	0.00					1504	\$300.00	Publication fee	\$0.00	TOTAL:			\$1,400.00
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submitted by: Robert E. Bushnell, Attorney-at-Law Suite 300, 1522 "K" Street, N.W. Washington, D.C. 20005-1202			Complete (if applicable)																								
Typed or Printed Name	Robert E. Bushnell	Payor No. <u>008439</u>	Reg. No. 27,774																								
Signature		Date January 3, 2006	Deposit Account User ID																								

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